EQUASS Assurance Application Form

**Introduction**

EQUASS (European Quality in Social Services) is an initiative of the European Platform for Rehabilitation (EPR). It aims to contribute to a European Social Service Sector where high-quality services ensure and promote inclusion and a high quality of life for the service users.

The EQUASS system for quality is customised for the social sector and offers a comprehensive approach based on specific quality criteria, performance indicators and formal external assessment and audit procedures.

This application form has been designed for EQUASS Assurance applicants, who wish to receive an external audit from an independent auditor. The application form is submitted at least 6 weeks before the audit scheduled date. If you do not have an audit scheduled, please contact your EQUASS Local Licence Holder -LLH or EQUASS representative first.

For information about how to provide the required information and documentation, please have a close look at the document “Guidelines for EQUASS application and other supporting information” (Annex 3 of “The EQUASS process and procedures for certification”).

The application form has the following sections:

Section 1: General information about your organisation and the type of audit you are planning for. If the audit takes place over more than 1 site, provide information on the other site(s) in 1b.

Section 2: Additional information that EQUASS can use to promote your certification, in case of a successful EQUASS Assurance audit.

Section 3: Additional detailed background information about your organisation and some statements you will have to confirm.

Section 4: List of documentation on **approaches** (Executive summaries in National Language) that must be sent together with the application.

Section 5: List of documentation on approaches (in National Language) that must be available during the site visit.

Section 6: List of documentation on **results** that must be sent together with the application.

Section 1

General information on the Application and Applicant Information

|  |  |
| --- | --- |
| Information about the Application and Applicant: | |
| Type of Application: | EQUASS Assurance |
| Country: |  |
| Audit coordination office: |  |
| Audit coordinator: |  |
| Audit coordinator Email: |  |
| Organisation name: |  |
| Business address: |  |
| Postal address:  (if different from your business address): |  |
| Telephone: |  |
| General E-mail: |  |
| Website organisation: |  |
| Name of CEO / Director: |  |
| Number of locations / sites: |  |

|  |  |
| --- | --- |
| Applicant Contact person: | |
| Name: |  |
| Function: |  |
| Email: |  |
| Direct Phone n°: |  |

|  |  |
| --- | --- |
| Size and scope of the Service(s) to be audited: | |
| Number of Persons Served: |  |
| Number of Full Time Equivalents (FTE): |  |
| Total number of Employees: |  |
| Types of Services provided: |  |
| Experience: |  |
| Audit Scope (will come on certificate): |  |

Section 1b

Overview of sites in a multi-site application

|  |  |
| --- | --- |
| Site #2: | |
| Name of site 2: |  |
| Address: |  |
| Telephone: |  |
| E-mail: |  |
| Contact person name: |  |
| Function of contact person: |  |
| Services: |  |
| Number of persons served: |  |
| Number of employees: |  |

Section 2

Additional information (to be published on our website, in the event of a successful audit)

|  |  |
| --- | --- |
| Additional Applicant information: | |
| Description of the organisation in English: |  |
| Description of the organisation in the National language (if applicable): |  |
| Twitter (if applicable): |  |
| Facebook page (if applicable): |  |
| YouTube Channel (if applicable): |  |

Section 3

**National and/or International Certifications / Recognition for Quality**

Please specify which other National and/or International certifications / recognition for quality have been achieved:

|  |  |
| --- | --- |
| National & International certification / recognition for quality: | |
| Name of the certification/recognition n°1: |  |
| Expiration date: |  |
| Name of the certification/recognition n°2: |  |
| Expiration date: |  |
| Name of the certification/recognition n°3: |  |
| Expiration date: |  |
| Name of the certification/recognition n°4: |  |
| Expiration date: |  |

Please confirm the statements below:

|  |  |
| --- | --- |
|  | *I declare that the organisation, as described above, meets all National Legislative Requirements for operating Social Services in its jurisdiction.* |
|  | *I have understood the requirements for implementation of the EQUASS criteria as stated in the EQUASS core document for this level of recognition.* |
|  | *I am attaching an overview of services / programs within the scope of this application* ***(Annex A)*** |
|  | *I am attaching a list of Employee functions within the scope of this application* ***(Annex B)*** |
|  | *I am attaching an organogram / description of the organisational structure of the scope of this application* ***(Annex C)*** |
|  | *I am including a high-resolution logo of our organisation to the annex folder of our application.* |

Please make sure to clearly label the files in your Annex folder

Section 4

**Documentation on Approaches**

*Please confirm that the following* ***Executive Summaries*** *of documented Approaches (in National Language) of the applicant organisation are uploaded with the application:*

|  |  |  |
| --- | --- | --- |
| Executive Summaries: | | |
|  | Criteria |  |
|  | No. 01 | Organisation’s Vision, Mission and Values (Annex D) |
|  | No. 03 | Organisation’s Quality Policy (Annex E) |
|  | No. 13 | Organisation’s Charter of Rights (Annex F) |
|  | No. 19 | Organisation’s Code of Ethics (Annex G) |
|  | No. 27 | Organisation’s policy and procedures for including Persons Served in the design, delivery and evaluation of services (Annex H) |
|  | No. 29 | Organisation’s concept of empowerment of Persons Served (Annex I) |
|  | No. 32 | Organisation’s concept of quality of life for Persons Served (Annex J) |
|  | No. 35 | Organisation’s procedures for involving Persons Served in the design of their Individual Plan (Annex K) |
|  | No. 38 | Organisation’s key service delivery activities (Annex L) |
|  | No. 48 | Organisation’s system for continuous improvement and learning (Annex M) |

Optional:

|  |  |
| --- | --- |
|  | Results of internal audit/self-evaluation that shows the success of implementing the EQUASS criteria |

***Note I****: Please mind****NOT****to upload complete documents. (Exception when the document has max 1 page A4. Only executive summaries of max 1 pages (A4) will be accepted)*

***Note II:*** *When you have carried out internal audits on EQUASS Criteria and/or self-evaluation of EQUASS Criteria, it is strongly recommended to make an* ***Executive Summary*** *of the results of this internal audit / self-evaluation and* ***upload this Executive Summary with the Application****. Based on this information the Auditor may have a good understanding that you have understood the success of your implementation of the EQUASS Criteria (Stage 3 of the Assessment Grid). Please have a close look at* *the document “Guidelines for EQUASS application and other supporting information” (Annex 3 of “The EQUASS process and procedures for certification”) to know how to present the* ***Executive Summary*** *of this internal audit / self-evaluation.*

Section 5

**Documentation on Approaches**

*Please confirm that the following documentation on Approaches (in National Language) of the Applicant organisation will be* ***available at the Site Visit*** *for the Auditor to review:*

| Documented Approaches: | | |
| --- | --- | --- |
|  | Criteria |  |
|  | No. 01 | The description of your Vision, Mission and Values |
|  | No. 03 | The description of your Quality Policy |
|  | No. 04 | The current Annual Plan |
|  | No. 07 | The Staff Recruitment and Staff Retention Policy |
|  | No. 09 | The current Plan for Staff development and learning |
|  | No. 10 | A description of current roles and responsibilities of (employees) Staff |
|  | No. 13 | The Charter of Rights that reflects fundamental rights of Persons Served |
|  | No. 17 | A description of the Complaint Management system |
|  | No. 18 | The Policy on Ethics and Wellbeing for all |
|  | No. 19 | The organisations’ Code of Ethics |
|  | No. 21 | The Health and Safety Plan for (employees) Staff and Persons Served |
|  | No. 22 | The Procedures on prevention of physical, mental and financial abuse of Persons Served |
|  | No. 23 | The Procedures to assure confidentiality of sensitive information, the accuracy of records, privacy, dignity and physical integrity of Persons Served |
|  | No. 27 | The Policy and Procedures for including Persons Served in the design, delivery and evaluation of Services |
|  | No. 29 | The defined concept of Empowerment of Persons Served |
|  | No. 32 | The defined concept of Quality of Life of (service users) Persons Served |
|  | No. 33 | The Individual Plan for Persons Served (4 examples) |
|  | No. 35 | The procedures for involving Persons Served in the individual planning process |
|  | No. 38 | The key Service Delivery Activities |
|  | No. 42 | Business and Service Results (on collective basis) |
|  | No. 42 | Independent review of organisational Results |
|  | No. 48 | The Continuous Improvement and Learning System |

Optional:

|  |  |
| --- | --- |
|  | Results of internal audit/self-evaluation that shows the success of implementing the EQUASS criteria |

Section 6

**Documentation on Results**

For the **EQUASS Assurance Application**, you have to **upload** the following Results:

***Note****: Please mind that the Results must be valid and relevant outcomes must be based on indicators (so also mention the indicators). Efforts will not be accepted as valid results.*

| Documented Results: | | |
| --- | --- | --- |
|  | Criteria |  |
|  | No. 09 | (The) Results of (employees’) Staff development activities |
|  | No. 16 | Results of evaluation: to what extent are the rights of Person Served respected in your daily work |
|  | No. 25 | Results of organisations’ Partnerships |
|  | No. 27 | Results on the Practice of Participation on an annual basis |
|  | No. 29 | Results on empowering Persons Served |
|  | No. 32 | The results of improving the quality of life of Persons Served |
|  | No. 35 | The results of involving Persons Served in their Individual Plans |
|  | No. 36 | Results of evaluation: to what extent does the (Social) Service Provider ensure a continuum of Services |
|  | No. 43 | Results on outcomes and benefits of the provided Services on individual basis |
|  | No. 45 | Results that show satisfaction of Persons Served and other relevant Stakeholders |
|  | No. 46 | Results of evaluation: to what extent are the Business Results understood by Persons Served, Staff and other relevant Stakeholders |
|  | No. 50 | Results of comparing performance, outcomes and activities |